

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>XX</i>	10891	7/1
O.I.P.E. CLASSIFIER		7	7-6-99
FORMALITY REVIEW	<i>XX</i>	71555	4-14-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 - Allowed I Interference
 (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	5/10/00
2	✓	✓	5/10/00
3	✓	✓	5/10/00
4	✓	✓	5/10/00
5	✓	✓	5/10/00
6	✓	✓	5/10/00
7	✓	✓	5/10/00
8	✓	✓	5/10/00
9	✓	✓	5/10/00
10	✓	✓	5/10/00
11	✓	✓	5/10/00
12	✓	✓	5/10/00
13	✓	✓	5/10/00
14	✓	✓	5/10/00
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here